

The following qualifying students from \_\_\_\_\_ High School were identified for taking AP Exams in May 2014 and completed that endeavor on \_\_\_\_\_, 2014. The exam fees for these students have been paid by the \_\_\_\_\_ school district and a verifying document showing such payment is enclosed. Thus, under the guidelines of the Advanced Placement Incentive Grant, the reimbursement for these costs being requested in the amount of the allowed federal government rate to be reimbursed to the school district.

[illegible]

Title
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If you have questions or comments about this form and/or process, please contact me at 402-471-0737, by e-mail at [mary.duffy@nebraska.gov](mailto:mary.duffy@nebraska.gov), or at address below:

Mailing address:

High-Ability Learner Program  
Department of Education  
301 Centennial Mall South  
P.O. Box 94987  
Lincoln, NE 68509-4987

Send reimbursement claim form to:

School District \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Fax #: 402-471-0117 ATTN: Mary Duffy

**NOTE: This claim form is to be mailed after May 15, 2014 and before September 15, 2014.**